

**PRIVATE SEDAN BUSINESS - REGISTRATION APPLICATION (INITIAL CERTIFICATION)**

→ Please attach pages as necessary to provide all requested information

Name and phone no. of individual filing this application: _____

Are you familiar with 31 DCMR Chapter 19?:

YES ☐

NO ☐

Do you have legal authority to file this application?

YES ☐

NO ☐

Legal name of business: _____ Trade name (if any): _____

Street address: _____

Mailing address (if different): _____

Location of business records (if different): _____

Registered agent for service of process: _____

BBL#: _____

Address: _____

Telephone no.: _____

Website URL: _____ Zero tolerance policies - URLs: _____

Customer service telephone no.: _____ Email address: _____

Hours of operation: _____

Trade dress policy: _____

→ Please affix a photograph or illustration of trade dress showing required placement on vehicle

Legal name of DDS providing app: _____ Trade name (if any): _____

Is DDS registered with DCTC? YES ☐ NO ☐

→ If "NO", the DDS must register at this time

Please explain how app shows driver is registered and not suspended: _____

Please explain how app shows driver is logged in: _____

Please explain how app shows most recent trip requested _____

→ Please affix screenshots for enforcement use, showing driver registration, log in, and most recent trip

Contact(s) for enforcement and compliance as required by § 1903.21: _____

Cellphone no.: _____ Email address: _____

Are the cellphone nos. and email addresses monitored are all times?:

YES ☐

NO ☐

Source of insurance required by § 1905:

Business ☐

Drivers ☐

Date by which business or drivers will be in compliance with insurance requirements: _____

Is the business licensed to do business in the District?:

YES ☐

NO ☐

Does the business maintain a current registry of its registered drivers and vehicles?

YES ☐

NO ☐

Does the website comply with § 1903.3?:

YES ☐

NO ☐

Does the business verify vehicle inspections as required by §§ 1903.4-1903.6?

YES ☐

NO ☐

Does the business perform criminal background checks as required by § 1903.16 (b)(1)?

YES ☐

NO ☐

Does the business perform sex offender checks required by § 1903.16 (b)(2)?

YES ☐

NO ☐

Does the business perform driving record checks required by § 1903.16 (b)(3)?

YES ☐

NO ☐

Is the business in compliance with Chapter 19?:

YES ☐

NO ☐

→ If you answered "NO", please explain on an attached page, including date(s) when compliance is expected

I swear or affirm subject to the penalties of perjury that the information provided on this form and in the attached documents is true and correct.

SIGNATURE

PRINTED NAME

DATE

THIS SPACE RESERVED FOR OFFICE USE

